Fill in this information to identify your c	ase:
United States Bankruptcy Court for the: DISTRICT OF NEVADA	
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. You	ır full name		
gov	te the name that is on your rernment-issued picture	AARON First Name	- First Name
you	ntification (for example, r driver's license or sport).	D. Middle Name	Middle Name
F	- F - · · · · ·	WILLIAMS	
	ng your picture ntification to your meeting	Last Name	Last Name
with	the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All	other names you		
hav yea	re used in the last 8 ers	First Name	First Name
Incl	Include your married or maiden names.	Middle Name	Middle Name
mai		Last Name	Last Name
	y the last 4 digits of	xxx - xx - 8 7 5 9	xxx - xx
nun	ır Social Security nber or federal ividual Taxpayer	OR	OR
	ntification number	9xx - xx	9xx - xx

Debtor 1 AARON D. WIL		AARON D. WILLIAM	VILLIAMS C			Case number (if known)		
			Ab	out Debtor 1:		About Debtor 2 (Sp	oouse Only in a Joint Case):	
4.	and En	usiness names nployer		I have not used any business nar	mes or EINs.	☐ I have not used	any business names or EINs.	
	(EIN) y	ication Numbers ou have used in t 8 years	Bus	iness name		Business name		
	Include	trade names and	Bus	iness name		Business name		
	doing b	ousiness as names	Bus	iness name		Business name		
			EIN	· — ⁻ — — — —		<u>EIN</u> — — —		
			EIN	· — ⁻ — — — —		_		
5.	Where	you live				If Debtor 2 lives at	a different address:	
				23 ROUNDHOUSE RD. mber Street		Number Street		
			_					
			SP	ARKS NV 89	431			
			City		Code	City	State ZIP Code	
			_	ASHOE inty		County		
				•		·		
			cou	our mailing address is different for one above, fill it in here. Note the urt will send any notices to you at the iling address.	at the	from yours, fill it in	g address is different here. Note that the court s to you at this mailing	
			Nur	nber Street		Number Street		
			P.O). Box		P.O. Box		
			City	State ZIP	Code	City	State ZIP Code	
6.		ou are choosing strict to file for	Ch	eck one:		Check one:		
	bankru			Over the last 180 days before filing petition, I have lived in this district than in any other district.	-		80 days before filing this lived in this district longer er district.	
				I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another (See 28 U.S.C.	reason. Explain. § 1408.)	
P	art 2:	Tell the Court Ab	out \	our Bankruptcy Case				
7.	Bankru	apter of the uptcy Code you		ck one: (For a brief description of e ankruptcy (Form 2010)). Also, go t				
	are cho under	oosing to file		Chapter 7				
				Chapter 11				
				Chapter 12				
			П	Chapter 13				

Debtor 1 AARON D. WILLIAMS		Case number (if known)						
8.	How you will pay the fee	cou pay	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.					
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).					
		By tha fee	quest that my fee be waived (You n law, a judge may, but is not required t n 150% of the official poverty line that in installments). If you choose this o ng Fee Waived (Official Form 103B) a	o, waive your fee, and may do applies to your family size ar otion, you must fill out the App	o so only if your income is less and you are unable to pay the			
	Have you filed for	☑ No						
	bankruptcy within the last 8 years?	☐ Yes	S.					
		District	RENO, NV	When 01/07/2009	Case number 09-50025			
		District		When MM / DD / YYYY	Case number			
		District		When	Case number			
10.	Are any bankruptcy	☑ No		WINT, BB / TTT				
	cases pending or being filed by a spouse who is	☐ Yes	S.					
	not filing this case with you, or by a business	Debtor		Relationsl	nip to you			
	partner, or by an	District		When	Case number,			
	affiliate?			MM / DD / YYYY	if known			
		Debtor		Relationsh	nip to you			
		District		When	Case number,			
				MM / DD / YYYY	if known			
11.	Do you rent your residence?	✓ No.	Go to line 12. Has your landlord obtained an evi- residence?	ction judgment against you an	d do you want to stay in your			
			No. Go to line 12. Yes. Fill out Initial Statement and file it with this bankruptcy	t About an Eviction Judgment / petition.	Against You (Form 101A)			

Debtor 1		AARON D. WILLIAMS					Case numb	er (if known)		
P	art 3:	Report About Ar	ıy Bı	usine	sses You Own as a	a Sole Pı	roprietor			
12.		ı a sole proprietor ull- or part-time ss?			Go to Part 4. Name and location of b	usiness				
	busines individu separate	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Name of business, if any Number Street					
	sole pro				City State ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above					de
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business			<i>set ap</i> st recei	filing under Chapter 11, propriate deadlines. If y nt balance sheet, statem f these documents do no	you indicat nent of ope	e that you are a s rations, cash-flow	mall business d v statement, and	lebtor, you I federal in	must attach your come tax return
	debtor?		No.	I am not filing under C	hapter 11.					
	For a definition of small business debtor, see			No.	I am filing under Chap the Bankruptcy Code.	ter 11, but	I am NOT a smal	l business debto	or accordin	g to the definition in
	11 U.S.C. § 101(51D).	C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and	l am a small busi	ness debtor acc	cording to the	he definition in the
P	art 4:	Report If You Ov	vn o	r Hav	e Any Hazardous F	Property	or Any Prope	erty That Ne	eds Imm	ediate Attention
14.	propert alleged immine	own or have any y that poses or is to pose a threat of nt and identifiable		No Yes.	What is the hazard?					
	hazard to public health or safety? Or do you own any property that needs immediate attention?				If immediate attention	is needed,	why is it needed?	?		
	perishal livestoc	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property?	Number	Street			
						City			State	ZIP Code

Debtor 1 AARON D. WILLIAMS

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:						
☐ Incapacity.	I have a mental illness or a mental deficiency that makes me					

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case): You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

П	I am not required	to	receive	а	briefing	about
	credit counseling					

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

		AARON D. WILLIAMS				Case number (if	Case number (if known)		
		Answer These Questions for Reporting Purposes							
16.	What ki have?	ind of debts do you	16a		-	sumer debts? Consumer de rimarily for a personal, family,		re defined in 11 U.S.C. § 101(8) usehold purpose."	
				 Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 					
			16c.	State the type of debts y	ou ow	e that are not consumer or bus	siness	s debts.	
17.	Are you Chapte	ı filing under r 7?		No. I am not filing under	r Chap	oter 7. Go to line 18.			
	any exe exclude adminis are paid availab	estimate that after empt property is ed and strative expenses d that funds will be le for distribution ecured creditors?	\square	•		•	-	xempt property is excluded and to distribute to unsecured creditors?	
18.		any creditors do timate that you		1-49 50-99 100-199 200-999		1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000	
19.		uch do you te your assets to th?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20.		uch do you te your liabilities to		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	

Debtor 1	AARON D. WILLIAI	MS	Case number (if known)	_		
Part 7:	Sign Below					
For you		I have examined this petition, and I de and correct.	eclare under penalty of perjury that the information provided is true	_		
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
		I request relief in accordance with the	chapter of title 11, United States Code, specified in this petition.			
		•	nt, concealing property, or obtaining money or property by fraud in an result in fines up to \$250,000, or imprisonment for up to 20 years, 9, and 3571.			
		X /s/ AARON D. WILLIAMS	x			
		AARON D. WILLIAMS, Debtor 1	Signature of Debtor 2	_		
		Executed on 01/19/2017	Executed on			
		MM / DD / YYYY	MM / DD / YYYY			

Debtor 1 AARON D. WILLIA	MS	Case number (if know	n)				
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in eligibility to proceed under Chapter 7, 1 relief available under each chapter for v	1, 12, or 13 of title 11, United Sta	tes Code, and have explained the				
f you are not represented by an attorney, you do not need to file this page.	the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
	X /s/ Sean P. Patterson, Esq. Signature of Attorney for Debtor	Date	01/19/2017 MM / DD / YYYY				
	Sean P. Patterson, Esq.						
	Printed name Sean Patterson., Esq.						
	Firm Name 232 Court Street						
	Number Street						
	Reno	NV	89501				
	City	State	ZIP Code				

5736

Bar number

Contact phone (775) 786-1615 Email address Illegalpat@aol.com

State

Fill in this i	information to i	dentify your case	and this filing:		
Debtor 1	AARON	D.	WILLIAMS		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filir	ng) First Name	Middle Name	Last Name		
United States	Bankruptey Court fo	r the: DISTRICT OF	NEVADA		
	Bankruptcy Court to	ule. <u>BioTitio1 of</u>	NEVADA		
Case number (if known)					if this is an led filing
Official For	m 106A/B				
Schedule	A/B: Property	У			12/15
Fart 1: C 1. Do you ow No. G	both are equally rerm. On the top of a Describe Each Form or have any legange to Part 2.	sponsible for supply iny additional pages, Residence, Buildi	Be as complete and accurate a ing correct information. If mo write your name and case number of the case of the ca	re space is needed, attach a mber (if known). Answer eve	separate ry question.
	Where is the propert				
1.1. 2123 ROUNDI	HOUSE RD.	Check all	he property? that apply.	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim	ims on Schedule D:
Street address, if a	valiable, of other descrip	Duple	e-family home ex or multi-unit building ominium or cooperative	Current value of the entire property?	Current value of the portion you own?
SPARKS City		431 Manu	factured or mobile home	\$111,000.00	\$111,000.00
WASHOE	State Zii	☐ Inves	stment property share	Describe the nature of yo interest (such as fee simple entireties, or a life estate)	ole, tenancy by the
County		Ш Who has	an interest in the property?	FEE SIMPLE	
THE DEBTOR	'S RESIDENCE	Check on ☑ Debte ☐ Debte ☐ Debte		Check if this is comm (see instructions)	nunity property
			ormation you wish to add abo identification number:	ut this item, such as local	_
			of your entries from Part 1, in		\$111,000.00
Part 2:	Describe Your V	ehicles		•	
			n any vehicles, whether they a also report it on Schedule G: Ex		
3. Cars, vans	s, trucks, tractors, s	sport utility vehicles,	motorcycles		
□ No ☑ Yes					

Deb	otor 1 AARON	D. WILLIAMS	Ca	ase number (if known)	
3.1. Mak	ie:	KIA FORTE	Who has an interest in the property? Check one. ✓ Debtor 1 only	Do not deduct secured clain amount of any secured clain Creditors Who Have Claims	ms on Schedule D:
Yea		2015	Debtor 2 only	Current value of the	Current value of the
	roximate mileage:		Debtor 1 and Debtor 2 only	entire property?	portion you own?
	er information:		At least one of the debtors and another	er \$11,700.00	\$11,700.00
201	5 KIA FORTE (a	pprox. 17000 miles)	Check if this is community property (see instructions)	,	
4.	•		and other recreational vehicles, other veal watercraft, fishing vessels, snowmobiles,	•	
5.		•	own for all of your entries from Part 2, inc Part 2. Write that number here	· · ·	\$11,700.00
P	art 3: Descr	ibe Your Personal	and Household Items		
Do	you own or have a	any legal or equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	_	ls and furnishings appliances, furniture, line	ens, china, kitchenware		
	☐ No ☑ Yes. Describ	e THE DEBTOR H	AS USED FURNITURE AND HOUSEH	HOLD GOODS.	\$2,000.00
7.	•		video, stereo, and digital equipment; compo evices including cell phones, cameras, med	•	
	□ No ☑ Yes. Describ	e THE DEBTOR H	AS AN IPAD.		\$200.00
8.		ues and figurines; paintin	gs, prints, or other artwork; books, pictures, ollections; other collections, memorabilia, c	•	
	✓ No ☐ Yes. Describ	e			
9.	Examples: Sport		, and other hobby equipment; bicycles, poo tools; musical instruments	l tables, golf clubs, skis;	
	✓ No Yes. Describ	e			
10.	•	s, rifles, shotguns, ammu	nition, and related equipment		
	✓ No Yes. Describ	e			
11.	Clothes Examples: Every	rday clothes, furs, leather	coats, designer wear, shoes, accessories		
	☐ No ☑ Yes. Describ	e THE DEBTOR H	AS USED CLOTHING.		\$100.00

Deb	otor 1 AARON D. WILLIAMS		Case number (if known)	
12.	Jewelry Examples: Everyday jewelry, costum gold, silver	e jewelry, engagement rings	, wedding rings, heirloom jewelry, watches, gems,	
	☑ No ☐ Yes. Describe			
13.	Non-farm animals Examples: Dogs, cats, birds, horses			
	No ✓ Yes. Describe THE DEBTO	OR HAS DOMESTIC PET	S.	\$100.00
14.	Any other personal and household did not list			
	✓ No Yes. Give specific information			
45		ntuine from Davt 2 includir	an any autica for name you have	
15.	Add the dollar value of all of your e attached for Part 3. Write the number		g any entries for pages you have	\$2,400.00
Pa	art 4: Describe Your Finan	cial Assets		
Do y	you own or have any legal or equital	ole interest in any of the fo	llowing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples: Money you have in your v	vallet, in your home, in a safe	e deposit box, and on hand when you file your	
	□ No ✓ Yes		Cash:	\$30.00
47				400.00
17.			cates of deposit; shares in credit unions, u have multiple accounts with the same	
	□ No			
	▼ Yes	Institution name:		
	17.1. Checking account:	Checking account (FR	ONTIER FINANCIAL C.U.)	\$845.00
	17.2. Savings account:	Savings account (FRO	NTIER FINANCIAL C.U.)	\$25.00
18.	Bonds, mutual funds, or publicly tr Examples: Bond funds, investment a		s, money market accounts	
	✓ No ☐ Yes Institutio	n or issuer name:		
19.	Non-publicly traded stock and inter an interest in an LLC, partnership,	•	nincorporated businesses, including	
	✓ No Yes. Give specific information about			
	them Name of	entity:	% of ownership:	

Deb	tor 1	AARON D. WILLIAM	MS		Case number (if known)	
20.	Negotia	ble instruments include	e personal checks,	negotiable and non-negotiable in , cashiers' checks, promissory no of transfer to someone by signing	tes, and money orders.	
	info	s. Give specific ormation about mlss	suer name:			
21.		nent or pension accou les: Interests in IRA, EF profit-sharing plans	RISA, Keogh, 401	(k), 403(b), thrift savings accounts	s, or other pension or	
		s. List each count separately. Type	e of account:	Institution name:		
22.	Your sh Example compar		sits you have mad	e so that you may continue servicent, public utilities (electric, gas, v		
	□ No Yes	S	In	stitution name or individual:		
	V 100	Electric:		HE DEBTOR HAS A DEPOSI	IT WITH NV ENERGY	\$150.00
23.	☑ No	es (A contract for a sp		ment of money to you, either for	life or for a number of years)	
24.	_				under a qualified state tuition pr	ogram.
		C. §§ 530(b)(1), 529A(b	b), and 529(b)(1).			
	✓ No ☐ Yes	s Ins	stitution name and	d description. Separately file the i	records of any interests. 11 U.S.C	. § 521(c)
25.	Trusts,		terests in proper	ty (other than anything listed in	•	
	_	s. Give specific ormation about them				
26.				s, and other intellectual propert oceeds from royalties and licensin	•	
	_	s. Give specific prmation about them				
27.		es, franchises, and oth es: Building permits, ex	_	-	s, liquor licenses, professional licer	nses
		s. Give specific				
Mor	ey or pi	roperty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	_					same of exemptions.
28.		unds owed to you				
	✓ No	s. Give specific informa	ation		Federa	ıl·
	_	out them, including whet				
	you	already filed the return	ns		State:	
	and	I the tax years			Local:	

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Deb	tor 1	or 1 AARON D. WILLIAMS			Case number (if known)		
29.	Exampl	support les: Past due or lump sur	m alimony, spousal suppor	t, child support, maintena	nce, divorce settlement, prop	perty settlement	
	✓ No ☐ Yes	s. Give specific information			Alimony:		
	_				Maintenance:		
					Support:		
					Divorce settlem	ent:	
					Property settlen	nent:	
30.	Example No		bility insurance payments, c al Security benefits; unpaid				
31.	Interes	ts in insurance policies	S	as account (HSA): credit	homeowner's, or renter's ins	urance	
	✓ No ☐ Yes	s. Name the insurance npany of each policy	Company name:		eficiary:	Surrender or refund value:	
32.	If you a		s due you from someone ving trust, expect proceeds ause someone has died		y, or are currently		
	✓ No	s. Give specific informati	ion				
33.	Exampl	•	whether or not you have file the disputes, insurance cla		demand for payment		
	✓ No ☐ Yes	s. Describe each claim					
34.	rights t	ontingent and unliquida o set off claims	lated claims of every natu	re, including counterclai	ims of the debtor and		
	✓ No ☐ Yes	s. Describe each claim					
35.	Any fin	ancial assets you did n	ot already list				
	✓ No ☐ Yes	s. Give specific informati	ion			-	
36.			our entries from Part 4, in number here			\$1,050.00	
Pa	art 5:	Describe Any Busi	ness-Related Proper	ty You Own or Have	an Interest In. List a	ny real estate in Part 1.	
37.	Do you	own or have any legal	or equitable interest in ar	ny business-related prop	perty?		
	_	Go to Part 6. s. Go to line 38.					

Deb	for 1 AARON D. WILLIAMS	Case number (if known)
		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accounts receivable or commissions you already earned	
	✓ No ☐ Yes. Describe	
39.	Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax related, chairs, electronic devices	machines, rugs, telephones,
	✓ No ☐ Yes. Describe	
40.	Machinery, fixtures, equipment, supplies you use in business, and tools of you	our trade
	✓ No ☐ Yes. Describe	
41.	Inventory	
	✓ No ☐ Yes. Describe	
42.	Interests in partnerships or joint ventures	
	✓ No ☐ Yes. Describe Name of entity:	% of ownership:
43.	Customer lists, mailing lists, or other compilations	
	 No Yes. Do your lists include personally identifiable information (as defined No Yes. Describe 	in 11 U.S.C. § 101(41A))?
44.	Any business-related property you did not already list	
	✓ No✓ Yes. Give specific information.	
45.	Add the dollar value of all of your entries from Part 5, including any entries fo attached for Part 5. Write that number here	
Pa	Describe Any Farm- and Commercial Fishing-Related Pro- If you own or have an interest in farmland, list it in Part 1.	perty You Own or Have an Interest In.
46.	Do you own or have any legal or equitable interest in any farm- or commercia	I fishing-related property?
	✓ No. Go to Part 7. ☐ Yes. Go to line 47.	
<i>4</i> 7	Farm animals	Current value of the portion you own? Do not deduct secured claims or exemptions.
41.	Examples: Livestock, poultry, farm-raised fish	
	☑ No	
	Yes	

Debt	tor 1	AARON D. WILLIAMS	Case no	umber (if known)	
48.	Crops	either growing or harvested			
		Give specific mation			
49.	Farm ar	d fishing equipment, implements, machinery, fixtures, ar	nd tools of trade		
	✓ No ☐ Yes				
50.	Farm ar	d fishing supplies, chemicals, and feed			
	✓ No ☐ Yes				
51.	Any fari	n- and commercial fishing-related property you did not a	ready list		
	_	Give specific mation			
52.		dollar value of all of your entries from Part 6, including a d for Part 6. Write that number here			\$0.00
Pa	rt 7:	Describe All Property You Own or Have an Inte	rest in That You I	Did Not List Above	1
53.	-	have other property of any kind you did not already list? es: Season tickets, country club membership			
	☑ No □ Yes	Give specific information.			
54.	Add the	dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Pa	rt 8:	ist the Totals of Each Part of this Form			
55.	Part 1: 1	Total real estate, line 2		-	\$111,000.00
56.	Part 2: 1	otal vehicles, line 5	\$11,700.00		
57.	Part 3: 1	otal personal and household items, line 15	\$2,400.00		
58.	Part 4: 1	Total financial assets, line 36	\$1,050.00		
59.	Part 5: 1	otal business-related property, line 45	\$0.00		
60.	Part 6: 1	otal farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: 1	otal other property not listed, line 54	\$0.00		
62.	Total pe	rsonal property. Add lines 56 through 61	\$15,150.00	Copy personal property total	+ \$15,150.00
63.	Total of	all property on Schedule A/B. Add line 55 + line 62			\$126,150.00

Debtor 1	formation to id	entity your c	case:			
	AARON First Name	D. Middle Name	WILLIAN Last Name	IS		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
	nkruptcy Court for					_
	TIKIUPICY COURT TO	ule. DISTRICT	OI NEVADA			Check if this is an amended filing
Case number (if known)						amended ming
Official Form	106C					
Schedule C	: The Prope	rty You Cla	aim as Exem _l	pt		04/1
Using the property space is needed, fi	you listed on Sche	edule A/B: Prope this page as m	erty (Official Form 10	6A/B)) as your source, list th	esponsible for supplying correct information. e property that you claim as exempt. If more ssary. On the top of any additional pages,
exempted up to the receive certain be exemption of 100° property is determ	he amount of any enefits, and tax-ex % of fair market v mined to exceed th	applicable statu cempt retiremen alue under a la hat amount, you	utory limit. Some e nt fundsmay be un w that limits the exe ur exemption would	xemp limite empti	tionssuch as those ed in dollar amount. F	value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the le statutory amount.
Part 1: Ide	entify the Prop	erty You Cla	im as Exempt			
1. Which set of	exemptions are y	ou claiming?	Check one only,	even	if your spouse is filing	with you.
You are	claiming state and	federal nonbank	kruptcy exemptions.	11 U	.S.C. § 522(b)(3)	
You are	claiming federal ex	cemptions. 11 U	.S.C. § 522(b)(2)			
2. For any prop	erty you list on S	chedule A/B tha	at you claim as exe	mpt, f	fill in the information	below.
•	of the property ar t lists this propert		Current value of the portion you own		ount of the emption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for th exemption	
Brief description:	DECIDENCE		\$111,000.00	<u> </u>	\$101,000.00	Nev. Rev. Stat. §§ 115.010, 21.090
THE DEBTOR'S					100% of fair market value, up to any	(1)(l),
ing from Schedule	e A/B: 1.1				applicable statutory	
ine nom <i>scheduk</i>			\$11,700.00	\square	\$0.00 100% of fair market	Nev. Rev. Stat. § 21.090(1)(f), (p)
Brief description:	E (approx 1700)) miles)				
Brief description: 2015 KIA FORTE Line from Schedule	E (approx. 1700) e A/B:3.1	0 miles)			value, up to any applicable statutory limit	

Debtor 1	AARON D. WILLIAMS		Case number	(if known)
Part 2:	Additional Page			
	ription of the property and line on 4/B that lists this property	Current value of the portion you own	ount of the mption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	eck only one box for h exemption	
HOUSEH	ption: TOR HAS USED FURNITURE AND OLD GOODS. Schedule A/B:6	\$2,000.00	\$2,000.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(b)
	ption: TOR HAS AN IPAD. Schedule A/B:7	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(b)
	ption: TOR HAS USED CLOTHING. Schedule A/B:11	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(b)
	ption: TOR HAS DOMESTIC PETS. Schedule A/B:13	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(b)
(1st exem	ption: TOR HAS CASH ON HAND. uption claimed for this asset) uchedule A/B:16	\$30.00	\$0.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(g)
(2nd exen	ption: TOR HAS CASH ON HAND. nption claimed for this asset) schedule A/B:16	\$30.00	\$30.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(z)
C.U.) (1st exem	ption: account (FRONTIER FINANCIAL aption claimed for this asset) acceptedule A/B:17.1	\$845.00	\$633.75 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(g)
C.U.) (2nd exen	ption: account (FRONTIER FINANCIAL nption claimed for this asset) schedule A/B:17.1	\$845.00	\$211.25 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(z)
C.U.) (1st exem	ption: account (FRONTIER FINANCIAL aption claimed for this asset) acchedule A/B:	\$25.00	\$18.75 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(g)

01/19/2017 01:09:10pm

Debtor 1 AARON D. WILLIAMS		Case numbe	r (if known)
Part 2: Additional Page			
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Savings account (FRONTIER FINANCIAL C.U.) (2nd exemption claimed for this asset) Line from Schedule A/B:17.2	\$25.00	\$6.25 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(z)
Brief description: THE DEBTOR HAS A DEPOSIT WITH NV ENERGY Line from Schedule A/B: 22	\$150.00	\$150.00 100% of fair market value, up to any applicable statutory limit	Nev. Rev. Stat. § 21.090(1)(z)

Fill in this info	ormation to i	dentify your case	:			
Debtor 1	AARON First Name	D. Middle Name	WILLIAMS Last Name			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
			NEWAR A			
United States Bar	nkruptcy Court to	r the: DISTRICT OF	NEVADA			
Case number (if known)					☐ Check if this is	s an
(ii iaiowii)					amended filing	9
Official Form	106D					
Schedule D:	Creditors	Who Have Cla	ims Secured b	y Property		12/15
correct informatio On the top of any 1. Do any credit No. Chee Yes. Fill Part 1: Lis 2. List all secure claim, list the correditor has a	No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims List All Secured Claims List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the Column A Amount of claim Do not deduct the that supports this portion					
2.1			property that	\$40,000,00	¢444 000 00	If any
FRONTIER FINA	NCIAL C.U.	secures the		\$10,000.00	\$111,000.00	
Creditor's name 5200 NEIL RD.		——— THE DEBT	OR'S RESIDENCE			
Number Street						
		As of the dat	te you file, the claim is	: Check all that apply.		
RENO	NV 89502	Unliquida				
City	State ZIP Code					
Who owes the deb	ot? Check one.	Nature of lie	n. Check all that apply			
Debtor 1 only Debtor 2 only		_	ment you made (such a		car loan)	
Debtor 1 and D	ebtor 2 only	_	lien (such as tax lien, r	necnanic's lien)		
_	the debtors and	another 🗀	nt lien from a lawsuit cluding a right to offset)			
Check if this c			D DEED OF TRUST			
Date debt was inc	urred <u>11-15</u>	Last 4 digits	of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$10,000.00

Debtor 1 AARON D. WILLIAMS	Case number (if known)			
Part 1: Additional Page After listing any entries on sequentially from the previous		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
FRONTIER FINANCIAL C.U. Creditor's name 5200 NEIL RD. Number Street	Describe the property that secures the claim: 2015 KIA FORTE (approx. 17000 miles)	\$20,400.00	\$11,700.00	\$8,700.00
RENO NV 89502 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, my Judgment lien from a lawsuit Other (including a right to offset) Purchase Money	s mortgage or secured	car loan)	
Date debt was incurred 9-15	_ Last 4 digits of account number			
84 MONTHS LOAN				

Add the dollar value of your entries in Column A on this page. Write that number here:

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

\$20,400.00

\$30,400.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

Fill in this i	nformation to i	dentify your c	ase:			
Debtor 1	AARON	D.	WILLIAMS	_		
	First Name	Middle Name	Last Name			
Debtor 2	Tiret Name	Middle Nove	Loot Name	_		
(Spouse, if filir	ig) First Name	Middle Name	Last Name			
United States	Bankruptcy Court fo	r the: DISTRICT	OF NEVADA	_		
Case number				-	7 Check if this is	an.
(if known)					amended filing	all
Official For	m 106E/F					
Schedule	E/F: Creditor	s Who Hav	e Unsecured Claims			12/15
Part 1: 1. Do any cre No. G Yes. 2. List all of y claim. For show both	cist All of Your leditors have priority to to Part 2. your priority unsect each claim listed, id priority and nonpriority and	PRIORITY Unsupport of the property of the prop	creditor has more than one priority f claim it is. If a claim has both priority as possible, list the claims in ms, fill out the Continuation Page of	vunsecured claim, list to unsecured claim, list to ority and nonpriority amalphabetical order according to the content of the	nounts, list that clait ording to the credite	m here and or's name. If
•	ne other creditors in		e instructions for this form in the in	struction booklet. Total claim	Priority amount	Nonpriority amount
2.1				24.00		
L ANGELA WEE	DD.			\$1.00	\$1.00	\$0.00
Priority Creditor's N			Last 4 digits of account numbe	r <u> </u>		
P.O. BOX 52 Number Stree	.t		When was the debt incurred?	VARIES	_	
			As of the date you file, the clair Contingent Unliquidated	n is: Check all that ap	ply.	
COPPER CEN City	ITER AK State	99573 ZIP Code	Disputed			
Who incurred t			Type of PRIORITY unsecured of	laim:		
Debtor 1 on	•		Domestic support obligations	3		
☐ Debtor 2 on ☐ Debtor 1 an	ly d Debtor 2 only		Taxes and certain other debt		nent	
	of the debtors and	another	intoxicated	ngary wille you were		
☐ Check if thi	s claim is for a cor	nmunity debt	Other. Specify			
Is the claim sub	oject to offset?					
✓ No Yes						
_	IS NOT OBLIGA	TED TO PAY C	HILD SUPPORT. HE HAS TO	SUPPLY HEALTH I	NSURANCE FOI	R HIS YOUNGE

Debtor 1	AARON D. WILLIAMS	Case number (if known)	
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims	
4. List all If a cre type of Part 3. 4.1 AT&T Nonpriority Cr P.O. BOX Number CAROL ST City Who incurr Debtor Debtor Debtor At least Check	es I of your nonpriority unsecured claims ditor has more than one nonpriority unse claim it is. Do not list claims already inc If more space is needed for nonpriority editor's Name 5093 Street IL 60197 State ZIP Code ed the debt? Check one. 1 only	in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed didded in Part 1. If more than one creditor holds a particular claim, list the other unsecured claims, fill out the Continuation Page of Part 2. Last 4 digits of account number When was the debt incurred? 2016 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Utility Bills	•
Nonpriority Cr P.O. BOX Number WILMING	Street	Last 4 digits of account number When was the debt incurred? 2015-17 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	\$1,700.00
Debtor Debtor Debtor At least Check	1 only	 Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card 	

Debtor 1 AARON D. WILLIAMS	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$5,000.00
CAPITAL ONE BANK	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. BOX 30281	When was the debt incurred? 2014-16	
Number Street	As of the date you file, the claim is: Check all that apply.	
	— ☐ Disputed	
SALT LAKE CITY UT 84130 City State ZIP Code	Type of NONDDIODITY upgeoured eleim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?		
No Voc		
Yes		
4.4		\$1,900.00
CBNA	Last 4 digits of account number	
Nonpriority Creditor's Name P.O.BOX 6283	When was the debt incurred? 2013-16	
Number Street	As of the date you file, the claim is: Check all that apply.	
	— ☐ Disputed	
SIOUX FALLS SD 57117 City State ZIP Code	Type of NONDDIODITY upgeoured eleim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?		
No No		
Yes		
4.5		\$300.00
COMENITY-EXPRESS	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. BOX 182789	When was the debt incurred? 2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
COLUMBUS OH 43218 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Cioun oui	
☑ No		
☐ Yes		

Debtor 1 AARON D. WILLIAMS	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$400.00
COMENITY-LANE BRYANT	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. BOX 182789	When was the debt incurred? 1999-08	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
COLUMBUS OH 43218 City State ZIP Code	·	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Credit Gard	
✓ No		
Yes		
4.7		\$1.00
DEBTWAVE CREDIT	Last 4 digits of account number	\$1.00
Nonpriority Creditor's Name	When was the debt incurred? 2016	
9325 SKY PARK CT #26 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
SAN DIEGO CA 92123	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Unpaid Loan	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.8		\$1,000.00
GREATER NEVADA C.U.	Last 4 digits of account number	
Nonpriority Creditor's Name 451 EAGLE STATION LANE	When was the debt incurred? 2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
CARCON CITY NV COTO	Disputed	
CARSON CITY NV 89701 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	LINE OF CREDIT	
Is the claim subject to offset?	-	
☑ No		
☐ Yes		

Debtor 1 AARON D. WILLIAMS	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$200.00
HEALOGICS SPECIALITY PHYS.	Last 4 digits of account number	· ·
Nonpriority Creditor's Name P.O. BOX 14099	When was the debt incurred? 2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	— ☐ Disputed	
BELFAST ME 04915 City State ZIP Code	— The of NONDRIORITY was a sound also	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	☑ Other. Specify Medical Bills	
Is the claim subject to offset?		
✓ No		
Yes		
4.10		\$1,500.00
MONEY TREE	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. BOX 58363	When was the debt incurred? 2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
SEATTLE WA 98138 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	onpara coan	
☑ No		
Yes		
4.11		\$200.00
NORTHERN NEVADA EMERGENCY PHYS.	Last 4 digits of account number	
Nonpriority Creditor's Name	When was the debt incurred? 2016	
P.O.BOX 95728 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
OKLAHOMA CITY OK 73143		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	☑ Other. Specify Medical Bills	
Is the claim subject to offset?	medical Dilio	
✓ No		
T Yes		

Debtor 1 AARON D. WILLIAMS	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.12		\$700.00
PROFESSIONAL FINANCE CO.	Last 4 digits of account number	
Nonpriority Creditor's Name 5754 W. 11th STREET SUITE 100	When was the debt incurred? 2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
	Disputed	
GREELEY CO 80634 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Collecting for - MEDICAL	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.13	Local Additional Community of the Commun	\$1,600.00
RC WILLEY Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. BÓX 65320	When was the debt incurred? 2013	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent	
	Unliquidated	
SALT LAKE CITY UT 84165	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt ls the claim subject to offset?	Unpaid Loan	
No		
Yes		
4.14		\$2,200.00
RENOWN HEALTH	Last 4 digits of account number	Ψ2,200.00
Nonpriority Creditor's Name P.O. BOX 30006	When was the debt incurred? 2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
RENO NV 89520 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Medical Bills	
Is the claim subject to offset?		
☑ No		
☐ Yes		

Debtor 1 AARON D. WILLIAMS	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.15		\$100.00
SOUTH RENO ATHLETIC CLUB	Last 4 digits of account number	
Nonpriority Creditor's Name 9393 GATEWAY DR.	When was the debt incurred? 2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
DENO NV 90524	Disputed	
RENO NV 89521 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	FOR UNPAID SERVICES	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.16		\$1,900.00
SYNCB/CARE CREDIT Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. BÓX 965036	When was the debt incurred? 2014-16	
Number Street	 As of the date you file, the claim is: Check all that apply. ☐ Contingent 	
	Unliquidated	
ORLANDO FL 32896	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? No		
☑ No □ Yes		
4.17		* 000.00
SYNCB/JC PENNEY	Last 4 digits of account number	\$900.00
Nonpriority Creditor's Name	When was the debt incurred? 2014-16	
P.O. BOX 965007 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
ORLANDO FL 32896	Disputed	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Oleun Garu	
✓ No		
☐ Yes		

Debtor 1 AARON D. WILLIAMS	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.18		\$900.00
SYNCB/LOWES	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. BOX 965005	When was the debt incurred? 2014-16	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
ORLANDO FL 32896 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	ordan dara	
☑ No		
Yes		
4.19		\$2,400.00
SYNCB/WALMART	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. BOX 965024	When was the debt incurred? 2011-16	
Number Street	As of the date you file, the claim is: Check all that apply.	
	— ☐ Disputed	
ORLANDO FL 32896 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?		
☑ No		
Yes		
4.20		\$800.00
T-MOBILE	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. BOX 53410	When was the debt incurred? 2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
BELLEVUE WA 98015 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Utility Bills	
Is the claim subject to offset?	Junity Dinis	
✓ No		
T Yes		

Debtor 1 AARON D. WILLIAMS	Case number (if known)	
Part 2: Your NONPRIORITY Uns	secured Claims Continuation Page	
After listing any entries on this page, number previous page.	er them sequentially from the	Total claim
4.21		\$450.00
TARGET NB	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. BOX 673	When was the debt incurred? 2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
MINNEAPOLIS MN 55440	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☐ Other. Specify	
☐ Check if this claim is for a community d	ebt Credit Card	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.22		\$600.00
Verizon Wireless Bankruptcy Dept.	Last 4 digits of account number	
Nonpriority Creditor's Name 500 TECHNOLOGY WAY SUITE 500	When was the debt incurred? 2016	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated	
SAINT CHARLES MO 63304	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community d		
Is the claim subject to offset?		
No Vos		
Yes		

Debtor 1 AARON D. WILLIAMS		Case number (if known)		
Part 4:	Add the Amounts for Each Type of Unsecured Claim			

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	\$1.00
	6b.	Taxes and certain other debts you owe the government	6b.	\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. 👍	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$1.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. 4	\$26,651.00
	6j.	Total. Add lines 6f through 6i.	6j.	\$26,651.00

Fill in this inf	ill in this information to identify your case:						
Debtor 1	AARON	D.	WILLIAMS				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court fo	or the: DISTRICT OF	NEVADA				
Case number							
(if known)							

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease
 is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of
 executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

F	ill in this inf	ormation to i	dentify your case	:		
De	ebtor 1	AARON	D.	WILLIAMS		
		First Name	Middle Name	Last Name		
De	ebtor 2					
(S	pouse, if filing)	First Name	Middle Name	Last Name	_	
Uı	nited States Ba	nkruptcy Court fo	r the: DISTRICT OF	NEVADA		
C	ase number					
_	known)				☐ Check if this is an amended filing	
					amended nillig	
Sc	hedule H	: Your Cod	ebtors			12/
two nee	married peop ded, copy the	le are filing toge Additional Page	ther, both are equally , fill it out, and numbe	responsible for supplyiner the entries in the boxes	. Be as complete and accurate as possible. If g correct information. If more space is on the left. Attach the Additional Page to this known). Answer every question.	
1.	Do you have ☑ No ☐ Yes	any codebtors?	(If you are filing a jo	int case, do not list either s	pouse as a codebtor.)	
2.	include Arizon	na, California, Ida		• • • •	itory? (Community property states and territories , Texas, Washington, and Wisconsin.)	
	□ No. Go t				. C O	
	Yes. Did	l your spouse, for	mer spouse, or legal e	quivalent live with you at th	e time?	

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

✓ No ☐ Yes

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Fill in this inform	ation to iden	tify your case:				
Debtor 1	AARON	D.	WILLIAN	IS		
	First Name	Middle Name	Last Name		Che	ck if this is:
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		_	An amended filing
						A supplement showing postpetition
United States Bankru Case number	ipicy Court for tr	le. DISTRICT O	INLVADA		-	chapter 13 income as of the following date
(if known)				_		MM / DD / YYYY
Official Form 10	<u> </u>					
Schedule I: You	ır Income					12/15
include information ab about your spouse. If your name and case no	out your spous more space is ı	e. If you are separ needed, attach a se n). Answer every c	rated and your spo eparate sheet to th	use is not	filing with y	spouse is living with you, ou, do not include information any additional pages, write
 Fill in your employ information. 	/ment		Debtor 1			Debtor 2 or non-filing spouse
If you have more th						
job, attach a separa with information ab	1 3	ployment status	✓ Employed☐ Not employed	ed		☐ Employed ☐ Not employed
additional employe	rs.	cupation	SHIFT MANAG	ER		
Include part-time, s or self-employed w		ployer's name	STARBUCKS			
Occupation may inc student or homema applies.		ployer's address	745 SPARKS I	BLVD.		Number Street
			SPARKS	NV	89434	-
			City	State	Zip Code	City State Zip Code
	Ho	w long employed t	here? 2 MON	тнѕ	_	
Part 2: Give D	otaila Abaut	Monthly Incom	•			
non-filing spouse unless		-	n. If you have noth	ing to repor	t for any line	, write \$0 in the space. Include your
If you or your non-filing s you need more space, a			er, combine the info	ormation for	all employe	rs for that person on the lines below. If
				For D	Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross payroll deductions) would be.		r, and commissions of the transfer of the tran		2	\$2,070.92	
3. Estimate and list r	nonthly overtin	ne pay.		3. +	\$0.00	
4. Calculate gross in	come. Add line	e 2 + line 3.		4.	\$2,070.92	

Deb	tor 1	AARON D. WILLIAMS			Case nu	umb	er (if known	ı)		
					For Debtor 1		For Debtor		<u>. </u>	
	Cop	y line 4 here		4.	\$2,070.92					
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Secu	rity deductions	5a.	\$417.30					
	5b.	Mandatory contributions for re-	tirement plans	5b.	\$0.00					
	5c.	Voluntary contributions for reti	rement plans	5c.	\$0.00					
	5d.	Required repayments of retirer	nent fund loans	5d.	\$0.00					
	5e.	Insurance		5e.	\$108.33					
	5f.	Domestic support obligations		5f.	\$0.00					
	_	Union dues		5g.	\$0.00					
	5h.	Other deductions. Specify:		5h. +	\$0.00					
6.	Add 5g +		ines 5a + 5b + 5c + 5d + 5e + 5f +	6.	<u>\$525.63</u>					
7.		culate total monthly take-home p	•	7.	\$1,545.29					
8.		all other income regularly recei		•	40.00					
	8a.	Net income from rental propert business, profession, or farm	y and from operating a	8a.	\$0.00					
		Attach a statement for each prop gross receipts, ordinary and nece the total monthly net income.	,							
	8b.	Interest and dividends		8b.	\$0.00					
	8c.	Family support payments that y dependent regularly receive	ou, a non-filing spouse, or a	8c.	\$0.00					
		Include alimony, spousal support divorce settlement, and property								
	8d.	Unemployment compensation		8d.	\$0.00					
	8e.	Social Security		8e.	\$0.00					
	8f.	Other government assistance to Include cash assistance and the cash assistance that you receive (benefits under the Supplemental or housing subsidies.	value (if known) or any non- , such as food stamps							
		Specify:		8f.	\$0.00					
	8g.	Pension or retirement income		8g.	\$0.00					
	8h.	Other monthly income.								
		Specify: See continuation sl	neet	8h. 4	\$600.00					
9.	Add	all other income. Add lines 8a	+ 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$600.00					
10.		culate monthly income. Add line the entries in line 10 for Debtor 1		10.	\$2,145.29]+[=[\$2,145.29
11.	Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.									
	Do r	not include any amounts already ir	ncluded in lines 2-10 or amounts tha	t are n	ot available to pay	exp	enses liste	d in Sc	hed	ule J.
	Spe	cify:						11.	+	\$0.00
12.			of line 10 to the amount in line 11. mmary of Your Assets and Liabilities				,	12.		\$2,145.29
4.5		applies.			_					Combined monthly income
13.		·	ase within the year after you file the	nis for	'm ?					
		No. Yes. Explain:								

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Debtor 1	AARON D. WILLIAMS		Case nur	mber (if known)
8h Other	Monthly Income (details)		For Debtor 1	For Debtor 2 or non-filing spouse
	NCOME		\$300.00	
REN	T FROM MOM		\$300.00	
		Totals:	\$600.00	

Fill in this	information to iden	tify your case:			Ohaa	-1. : £ 41-:- :			
Debtor 1	AARON	D.	WILLI	AMS	1	ck if this is: An amende	ed filina		
200101 1	First Name	Middle Name	Last Nar		ı —		ent showing	postpetition	
Debtor 2 (Spouse, if	filing) First Name	Middle Name	Last Nar	me		chapter 13 following da	expenses as ate:	s of the	
United Stat	tes Bankruptcy Court for th	ne: DISTRICT OF I	NEVADA			NANA / DD //	2000/	_	
Case numb		<u> </u>				MM / DD / `	YYYY		
(if known)									
Official Fo	orm 106J								
Schedule	J: Your Expens	es						12/15	
correct inform	ete and accurate as possination. If more space is seenumber (if known). Ar Describe Your Hous	needed, attach anoth nswer every question	er sheet to th		-		-		
	joint case?	Jonota							
	Go to line 2. Does Debtor 2 live in a	separate household	?						
	□ No								
	Yes. Debtor 2 must	file Official Form 106J	J-2, Expenses	for Separate Housel	hold of	Debtor 2.			
2. Do you h	nave dependents?	No		Dependent's relationship to		to De	pendent's	Does dependent	
	st Deptor 1 and	Yes. Fill out this information for each dependent		Debtor 1 or Debtor 2		ag	•	live with you?	
Debtor 2.		·		DAUGHTER		17	17	✓ No · ☐ Yes	
	ate the dependents'			DALICHTER		42		✓ No	
names.				DAUGHTER		12		Yes	
				MOTHER		<u>60</u>	ı	□ No · 🔽 Yes	
								□ No	
				-				Yes	
								□ No · □ Yes	
3. Do vour	expenses include	EZ No						□ res	
	s of people other than	✓ No ✓ Yes							
yourself	and your dependents?	_							
Part 2:	Estimate Your Ongo	oing Monthly Eyr	naneae						
_				s using this form of		nlomont in	a Chantar 1	12 0000	
to report expe	r expenses as of your ba enses as of a date after th	he bankruptcy is filed							
	fill in the applicable date		-4 ! 6	longer the realize of					
-	nses paid for with non-cance and have included it	-	-			<u>y</u>	our expens	es	
	The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.					4.		\$150.00	
	luded in line 4:	, <u>g</u> , ou							
4a. Rea	l estate taxes					4a.		\$60.00	
4b. Prop	perty, homeowner's, or ren	ter's insurance				4b.		\$50.00	
4c. Hom	ne maintenance, repair, an	d upkeep expenses				4c.		\$100.00	
4d. Hom	neowner's association or co	ondominium dues				4d.		\$230.00	

Deb	otor 1 AARON D. WILLIAMS Case	e number (if k	nown)	
			Your expenses	
5.	Additional mortgage payments for your residence, such as home equity loans	5.		
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.		\$125.00
	6b. Water, sewer, garbage collection	6b.		\$55.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		\$145.00
	6d. Other. Specify:	6d.		
7.	Food and housekeeping supplies	7.		\$550.00
8.	Childcare and children's education costs	8.		
9.	Clothing, laundry, and dry cleaning (See continuation sheet(s) for	details) 9.		\$115.00
10.	Personal care products and services	10.		\$20.00
11.	Medical and dental expenses	11.		\$120.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.		\$140.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.		\$100.00
14.	Charitable contributions and religious donations	14.		
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	158	3	
	15b. Health insurance	15		
	15c. Vehicle insurance	150		\$100.00
	15d. Other insurance. Specify:	150	-	ψ100.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.		
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1 2015 KIA FORTE	178	a	\$360.00
	17b. Car payments for Vehicle 2	171	O	
	17c. Other. Specify:	170	o	
	17d. Other. Specify:	170	d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
19.	Other payments you make to support others who do not live with you. Specify:	19.		

Deb	tor 1	AARON D. WILLIAMS	Case number (if known	1)
20.		eal property expenses not included in lines 4 or 5 of this form or on ale I: Your Income.		
	20a. N	Mortgages on other property	20a.	
	20b. F	Real estate taxes	20b.	
	20c. F	Property, homeowner's, or renter's insurance	20c.	
	20d. N	Maintenance, repair, and upkeep expenses	20d.	
	20e. H	Homeowner's association or condominium dues	20e.	
21.	Other.	Specify: PET CARE	21.	+\$60.00
22.	Calcula	ate your monthly expenses.	_	
	22a. <i>A</i>	Add lines 4 through 21.	22a.	\$2,480.00
	22b. (Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	
	22c. A	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$2,480.00
23.	Calcula	ate your monthly net income.	_	
	23a. (Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$2,145.29
	23b. (Copy your monthly expenses from line 22c above.	23b. _	\$2,480.00
		Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	(\$334.71)
24.	Do you	expect an increase or decrease in your expenses within the year after you file	e this form?	
		mple, do you expect to finish paying for your car loan within the year or do you exp nt to increase or decrease because of a modification to the terms of your mortgage?		
	☐ No			
	✓ Ye	es. Explain here: THE DEBTOR GETS RENT FROM HIS MOTHER. HE BUYS ALL TH	E GROCERIES.	
		THE PERSON SELECTION AND THE METERS ARE THE		

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Deb	tor 1	AARON D. WILLIAMS	Case number (if know	n)
9.		ng, laundry, and dry cleaning (details):		
	CLOTI	HING		\$100.00
	LAUNI	DRY	_	\$15.00
			Total:	\$115.00

Fill in this in	formation to i			
Debtor 1	AARON First Name	D. Middle Name	WILLIAMS Last Name	
Debtor 2	riistivanie	Middle Name	Lastivallie	
(Spouse, if filing	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court fo	or the: DISTRICT OF	NEVADA	
Case number (if known)				☐ Check if this
,				amended fil

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

P	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$111,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$15,150.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$126,150.00
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$30,400.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$1.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$26,651.00
	Your total liabilities	\$57,052.00
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,145.29
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$2,480.00

Deb	otor 1	AARON D. WILLIAMS	Case number (if known)		
Р	art 4:	Answer These Questions for Administrative and Statistic	cal Records		
6.	Are yo	u filing for bankruptcy under Chapters 7, 11, or 13?			
	□ No ✓ Ye	o. You have nothing to report on this part of the form. Check this box and $\mathfrak s\mathfrak t$	abmit this form to the court with your other schedules.		
7.	What k	ind of debt do you have?			
	لظا	our debts are primarily consumer debts. Consumer debts are those "incumily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statis			
		Dur debts are not primarily consumer debts. You have nothing to report o is form to the court with your other schedules.	n this part of the form. Check this box and submit		
8.		he Statement of Your Current Monthly Income: Copy your total current me Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	onthly income from \$3,817.24		

Total claim

B. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations. (Copy line 6a.)	\$1.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. Total. Add lines 9a through 9f.	\$1.00

Fill in this in	formation to i			
Debtor 1	AARON First Name	D. Middle Name	WILLIAMS Last Name	
Debtor 2 (Spouse, if filing		Middle Name	Last Name	
(1)	,	or the: DISTRICT OF		
Case number (if known)				☐ Check if this is a amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT a	n attorney to help you fill out bankruptcy forms?
☑ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have read the true and correct.	he summary and schedules filed with this declaration and that they are
V /s/ AADON D WILLIAMS	V
X /s/ AARON D. WILLIAMS AARON D. WILLIAMS, Debtor 1	Signature of Debtor 2
Date <u>01/19/2017</u> MM / DD / YYYY	Date MM / DD / YYYY

Debtor 1	AARON First Name	D. Middle Nam	<u> </u>	WILLIAMS Last Name			
Debtor 2	riistivamo	Middle Hairi		Lastivanic			
(Spouse, if filing	j) First Name	Middle Nam	е	Last Name			
United States Ba	ankruptcy Court for	the: DISTRIC	T OF NE	VADA			
Case number					_	Check if th	nis is an
(if known)						amended t	filing
Official Forn	n 107						
Statement o	of Financial	Affairs for	r Indivi	iduals Fil	ing for Bankruptcy		04/16
our name and c	ase number (if kn	own). Answer	every qu	estion.	this form. On the top of any add ere You Lived Before	itional page	s, write
Fait I. Gi	ive Details ADC	out four war	itai Stai	tus and win	ere fou Liveu Beiore		
	r current marital s	tatus?					
☐ Married ✓ Not marr	ried						
كا			hava atha				
L. During the R	ası ə years, nave	you iived anyw	nere otne	er than where	you live now?		
□ No		-		er than where			
□ No ☑ Yes. Lis	et all of the places y	-	ast 3 year	s. Do not inclu	de where you live now.		
□ No	et all of the places y	-	ast 3 year	s. Do not inclu			Dates Debtor 2 lived there
□ No ☑ Yes. Lis	et all of the places y	-	ast 3 year Dates	s. Do not inclu	de where you live now.		lived there
□ No ☑ Yes. Lis Debtor 1:	et all of the places y	-	ast 3 year Dates	s. Do not inclu	de where you live now. Debtor 2:		lived there
□ No ☑ Yes. Lis Debtor 1:	et all of the places y	-	ast 3 year Dates lived t	s. Do not inclu Debtor 1 here	de where you live now. Debtor 2:		lived there Same as Debtor
No Yes. Lis Debtor 1:	it all of the places y	-	ast 3 year Dates lived to From	Debtor 1 here	Debtor 2: Same as Debtor 1		lived there Same as Debtor From
No Yes. Lis Debtor 1: 6510 TA Number SUN VA	t all of the places y NANA CT. Street	ou lived in the l	ast 3 year Dates lived to From	Debtor 1 here	Debtor 2: Same as Debtor 1 Number Street	IP Code	lived there Same as Debtor From
No Yes. Lis Debtor 1: 6510 TA Number	t all of the places y NANA CT. Street	rou lived in the I	ast 3 year Dates lived to From	Debtor 1 here	Debtor 2: Same as Debtor 1	IP Code	lived there Same as Debtor From
No Yes. Lis Debtor 1: 6510 TA Number SUN VA	t all of the places y : NANA CT. Street LLEY NA	ou lived in the l	ast 3 year Dates lived to From To Dates	s. Do not inclu Debtor 1 here 10-13 9-14 Debtor 1	Debtor 2: Same as Debtor 1 Number Street	IP Code	Iived there Same as Debtor From To Dates Debtor 2
No Yes. Lis Debtor 1: 6510 TA Number SUN VA City	t all of the places y : NANA CT. Street LLEY NA	ou lived in the l	ast 3 year Dates lived to From To —	s. Do not inclu Debtor 1 here 10-13 9-14 Debtor 1	Debtor 2: Same as Debtor 1 Number Street City State Z	IP Code	Iived there Same as Debtor From To Dates Debtor 2 lived there
No Yes. Lis Debtor 1: 6510 TA Number SUN VA City Debtor 1:	it all of the places y : NANA CT. Street LLEY Sta	7 89433 te ZIP Code	ast 3 year Dates lived to From To Dates	s. Do not inclu Debtor 1 here 10-13 9-14 Debtor 1	Debtor 2: Same as Debtor 1 Number Street City State Z Debtor 2:	IP Code	Iived there Same as Debtor From To Dates Debtor 2 lived there
No Yes. Lis Debtor 1: 6510 TA Number SUN VA City Debtor 1:	t all of the places y : NANA CT. Street LLEY NA	7 89433 te ZIP Code	ast 3 year Dates lived to From To Dates lived to	s. Do not inclu Debtor 1 here 10-13 9-14 Debtor 1 here	Debtor 2: Same as Debtor 1 Number Street City State Z Debtor 2:	IP Code	Iived there Same as Debtor From To Dates Debtor 2 Iived there Same as Debtor
No Yes. Lis Debtor 1: 6510 TA Number SUN VA City Debtor 1:	t all of the places y NANA CT. Street LLEY Sta	7 89433 te ZIP Code	ast 3 year Dates lived to From To Dates lived to	Debtor 1 here 10-13 9-14 Debtor 1 here	Debtor 2: Same as Debtor 1 Number Street City State Z Debtor 2:	IP Code	Iived there Same as Debtor From To Dates Debtor 2 Iived there Same as Debtor From
No Yes. Lis Debtor 1: 6510 TA Number SUN VA City Debtor 1: 2132 RC Number	INANA CT. Street LLLEY Sta Street NV Sta	7 89433 te ZIP Code	ast 3 year Dates lived to From To Dates lived to	s. Do not inclu Debtor 1 here 10-13 9-14 Debtor 1 here	Debtor 2: Same as Debtor 1 Number Street City State Z Debtor 2: Same as Debtor 1		Iived there Same as Debtor From To Dates Debtor 2 Iived there Same as Debtor From
No Yes. Lis Debtor 1: 6510 TA Number SUN VA City Debtor 1: 2132 RC Number	NANA CT. Street LLLEY NV Sta :	7 89433 te ZIP Code	ast 3 year Dates lived to From To Dates lived to	s. Do not inclu Debtor 1 here 10-13 9-14 Debtor 1 here	Debtor 2: Same as Debtor 1 Number Street City State Z Debtor 2:		Iived there Same as Debtor From To Dates Debtor 2 Iived there Same as Debtor From
No Yes. Lis Debtor 1: 6510 TA Number SUN VA City Debtor 1: 2132 RC Number SPARKS City	Street DUNDHOUSE RESTREET Street	7 89433 te ZIP Code	ast 3 year Dates lived to From To Dates lived to From To To To To To To To To To	Debtor 1 here 10-13 9-14 Debtor 1 here 9-14 PRESENT	Debtor 2: Same as Debtor 1 Number Street City State Z Debtor 2: Same as Debtor 1	IP Code	Iived there Same as Debtor From To Dates Debtor 2 Iived there Same as Debtor From To

Deb	otor 1	AARON D. WILLIAMS		Case nur	mber (if known)	
P	art 2:	Explain the Sources of	Your Income			
4.	Fill in th	I have any income from employ e total amount of income you rec re filing a joint case and you have	ceived from all jobs and all bus	inesses, including par	t-time activities.	endar years?
	☐ No ✓ Yes	. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ry 1 of the current year until I filed for bankruptcy:	Wages, commissions, bonuses, tips	\$1,000.00	Wages, commissions, bonuses, tips	
0	uuto you	· ····ou io: builli aptoy:	Operating a business		Operating a business	
		calendar year:	Wages, commissions, bonuses, tips	\$30,100.00	Wages, commissions, bonuses, tips	
(Jar	nuary 1 to	December 31,	Operating a business		Operating a business	
		ndar year before that:	Wages, commissions, bonuses, tips	\$31,000.00	Wages, commissions, bonuses, tips	
(Jar	nuary 1 to	December 31, <u>2015</u>)	Operating a business		Operating a business	
5.	Include unemplo and gan Debtor		at income is taxable. Example payments; pensions; rental inc u are in a joint case and you h	es of other income are come; interest; dividen ave income that you re	ds; money collected from law eceived together, list it only c	vsuits; royalties;
	□ No	h source and the gross income f	ioni each source separatery. L	50 Not include income	triat you listed in line 4.	
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
		ry 1 of the current year until I filed for bankruptcy:				
-	the lest	aalandan ya - ***	CASHED OUT 401k	\$5,700.00		
		calendar year: December 31, 2016)	FOOD STAMPS	\$600.00		
For	the cale	ndar year before that:				
		December 31, 2015)				

Deb	otor 1	AARON D. WILLIAMS	Case number (if known)
P	art 3:	List Certain Payments You	Made Before You Filed for Bankruptcy
6.	Are eith	er Debtor 1's or Debtor 2's debts pri	marily consumer debts?
	□ No.		primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as or a personal, family, or household purpose."
		During the 90 days before you filed	for bankruptcy, did you pay any creditor a total of \$6,425* or more?
		☐ No. Go to line 7.	
		total amount you paid that	whom you paid a total of \$6,425* or more in one or more payments and the creditor. Do not include payments for domestic support obligations, such as Also, do not include payments to an attorney for this bankruptcy case.
		* Subject to adjustment on 4/01/19 a	and every 3 years after that for cases filed on or after the date of adjustment.
	✓ Yes.	Debtor 1 or Debtor 2 or both have	primarily consumer debts.
		During the 90 days before you filed	for bankruptcy, did you pay any creditor a total of \$600 or more?
		No. Go to line 7.	
		creditor. Do not include pa	whom you paid a total of \$600 or more and the total amount you paid that syments for domestic support obligations, such as child support and alimony. ents to an attorney for this bankruptcy case.
7.	Insiders corporati agent, in	include your relatives; any general par ons of which you are an officer, directo	y, did you make a payment on a debt you owed anyone who was an insider? theres; relatives of any general partners; partnerships of which you are a general partner; or, person in control, or owner of 20% or more of their voting securities; and any managing e as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations
	✓ No ☐ Yes.	List all payments to an insider.	
8.		year before you filed for bankruptc	y, did you make any payments or transfer any property on account of a debt that
	Include p	payments on debts guaranteed or cosi	gned by an insider.
	✓ No ☐ Yes.	List all payments that benefited an in	sider.

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Deb	tor 1	AARON D. WILLIAMS	Case number (if known)
Pa	art 4:	Identify Legal Actions, Repossessions, and Foreclosur	es
9.	List all s	I year before you filed for bankruptcy, were you a party in any lawsuit such matters, including personal injury cases, small claims actions, divorce ations, and contract disputes.	· · · · · · · · · · · · · · · · · · ·
	✓ No ☐ Yes	. Fill in the details.	
10.	seized,	I year before you filed for bankruptcy, was any of your property reposor levied? Ill that apply and fill in the details below.	sessed, foreclosed, garnished, attached,
		Go to line 11. Fill in the information below.	
11.		90 days before you filed for bankruptcy, did any creditor, including a best sfrom your accounts or refuse to make a payment because you owed	
	✓ No ☐ Yes	. Fill in the details.	
12.		l year before you filed for bankruptcy, was any of your property in the s, a court-appointed receiver, a custodian, or another official?	possession of an assignee for the benefit of
	✓ No ☐ Yes		
Pa	art 5:	List Certain Gifts and Contributions	
13.	Within	2 years before you filed for bankruptcy, did you give any gifts with a to	otal value of more than \$600 per person?
	✓ No ☐ Yes	. Fill in the details for each gift.	
14.	Within to any o	2 years before you filed for bankruptcy, did you give any gifts or contr charity?	ibutions with a total value of more than \$600
	✓ No ☐ Yes	. Fill in the details for each gift or contribution.	
Pa	art 6:	List Certain Losses	
15.		l year before you filed for bankruptcy or since you filed for bankruptc saster, or gambling?	y, did you lose anything because of theft, fire,
	✓ No ☐ Yes	. Fill in the details.	

Debtor 1 AARON D. WILLIAMS		Case number (if known)						
P	art 7:	List Cert	tain Pa	ayments or	Transfers			
16.	anyone	you consult	ed abo	ut seeking ba	iptcy, did you or anyone else nkruptcy or preparing a banl preparers, or credit counseling	kruptcy petition?		
	✓ No ☐ Yes. Fill in the details.							
17.	Within anyone	1 year before who promis	you filed to h	elp you deal v	ptcy, did you or anyone else with your creditors or to mak			perty to
	□ No	s. Fill in the d		or transfer tha	t you listed on line 16.			
	BTWAV	E CREDIT			Description and value of a DEBT CONSOLIDATION	• • • •	Date payment or transfer was made	Amount of payment
	5 SKY I	PARK CT. #	26		_		6-16 TO 7-16	\$718.00
SAI	N DIEGO	0	CA State	92123 ZIP Code	_			
	Do not i No Yes Within you are	s. Fill in the d 10 years before a beneficiar 5. Fill in the d	etails. ore you y? (1	sfers that you filed for bank These are often	s made as security (such as g have already listed on this stat kruptcy, did you transfer any n called asset-protection devic counts, Instruments, Sa	property to a self-settled tes.)	rust or similar devic	
20.		-	-	led for bankru d, or transfer	iptcy, were any financial acc	ounts or instruments held	in your name, or for	your
	Include	checking, sa	vings, n	noney market,	or other financial accounts; ce ociations, and other financial in	' '	in banks, credit unior	s, brokerage
	□ No ✓ Yes	s. Fill in the d	etails.					
GR	EATER	NEVADA C	.U.		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		cial Institution				✓ Checking	11-16	\$0.00
Num	ber Stre	eet			- -	Savings Money market Brokerage		
SP/	ARKS		NV	ZID Codo	_	Other		

Debtor 1 AARON D. WIL	r 1 AARON D. WILLIAMS Case number (if known to be compared to be c						
	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
GREATER NEVADA C.U. Name of Financial Institution			or transferred				
IVallie of Fillaricial illustration	XXXX	_ Checking	11-16	\$0.00			
Number Street		✓ Savings ☐ Money market ☐ Brokerage					
SPARKS NV		☐ Other					
City Stat	e ZIP Code						
for securities, cash, or o		r bankruptcy, any safe dep	osit box or other de	oository			
Yes. Fill in the details	S.						
22. Have you stored proper✓ No✓ Yes. Fill in the detail:	ty in a storage unit or place other than you	r home within 1 year before	e you filed for bankru	uptcy?			
Part 9: Identify Pro	perty You Hold or Control for Some	eone Else					
23. Do you hold or control a or hold in trust for some	any property that someone else owns? Inceone.	lude any property you borr	rowed from, are stor	ing for,			
✓ No ☐ Yes. Fill in the detail:	s.						
Part 10: Give Details	About Environmental Information						
For the purpose of Part 10, t	he following definitions apply:						
hazardous or toxic substa	s any federal, state, or local statute or regu ance, wastes, or material into the air, land, ulations controlling the cleanup of these su	soil, surface water, ground	lwater, or other med				
	facility, or property as defined under any e operate, or utilize it, including disposal site		you now own, opera	ate, or			
	ns anything an environmental law defines a aterial, pollutant, contaminant, or similar ite		rdous substance, to	xic			
Report all notices, releases,	and proceedings that you know about, reg	ardless of when they occur	rred.				
24. Has any governmental ι law?	unit notified you that you may be liable or p	otentially liable under or in	violation of an envi	ronmental			
✓ No ☐ Yes. Fill in the detail:	s.						

Deb	otor 1	AARON D. WILLIAMS	Case number (if known)						
25.	Have yo	u notified any governmental unit of any re	ease of hazardous material?						
	✓ No	Fill in the details.							
26			ative proceeding under any environmental law? Include settlements and						
20.	orders.	a been a party in any judicial of administra	and proceeding under any environmental law: metade settlements and						
	☑ No								
	☐ Yes.	Fill in the details.							
P	art 11:	Give Details About Your Busines	s or Connections to Any Business						
27.	Within 4 business		you own a business or have any of the following connections to any						
			profession, or other activity, either full-time or part-time						
	_	A member of a limited liability company (LLC A partner in a partnership	c) or limited liability partnership (LLP)						
		An officer, director, or managing executive of	f a corporation						
		An owner of at least 5% of the voting or equi	ty securities of a corporation						
		No. None of the above applies. Go to Part 12.							
••		Check all that apply above and fill in the de							
28.		years before you filed for bankruptcy, did cial institutions, creditors, or other parties	you give a financial statement to anyone about your business? Include .						
	□ No								
	Yes.	Fill in the details below.							
P	art 12:	Sign Below							
that pro	t answers perty by f	are true and correct. I understand that ma	Affairs and any attachments, and I declare under penalty of perjury aking a false statement, concealing property, or obtaining money or e can result in fines up to \$250,000, or imprisonment for up to 20 years,						
-		N D. WILLIAMS X							
,		. WILLIAMS, Debtor 1	Signature of Debtor 2						
l	Date0	01/19/2017	Date						
Did	you attac	h additional pages to Your Statement of F	inancial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?						
	No Yes								
Did	you pay o	or agree to pay someone who is not an att	orney to help you fill out bankruptcy forms?						
	Yes. Nan	ne of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						

Fill in this information to identify your case:					
Debtor 1	AARON	D.	WILLIAMS		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: DISTRICT OF NEVADA					
Case number (if known)					
(II KIIOWII)					

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

an

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D), fill in the information below.
 Identify the creditor and the property that is collateral
 What do you intend to do with the
 Did you claim the property

property that secures a debt? as exempt on Schedule C? Creditor's No FRONTIER FINANCIAL C.U. Surrender the property. name: Retain the property and redeem it. Yes Retain the property and enter into a Description of $\overline{\mathbf{Q}}$ THE DEBTOR'S RESIDENCE Reaffirmation Agreement. property Retain the property and [explain]: securing debt: Creditor's FRONTIER FINANCIAL C.U. Surrender the property. No name: Retain the property and redeem it. Yes Retain the property and enter into a Description of 2015 KIA FORTE (approx. 17000 miles) Reaffirmation Agreement. property Retain the property and [explain]: securing debt:

01/19/2017 01:09:14pm

Debtor 1	AARON D. WILLIAMS		Case number (if known)
Part 2	List Your Unexpired Pe	rsonal Property Leases	
fill in the	information below. Do not list rea	l estate leases. Unexpired lea	Executory Contracts and Unexpired Leases (Official Form 106G), ases are leases that are still in effect; the lease period has not trustee does not assume it. 11 U.S.C. § 365(p)(2).
Des	cribe your unexpired personal pro	perty leases	Will this lease be assumed?
Non	e.		
Part 3			
	penalty of perjury, I declare that I nal property that is subject to an u	•	about any property of my estate that secures a debt and
	N D. WILLIAMS N D. WILLIAMS, Debtor 1	X Signature of Deb	tor 2
Date	01/19/2017 MM / DD / YYYY	Date	YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liqudation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans:
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee

total fee

\$275

Similar to chapter 13, chapter 12 permits family farmers

and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together-called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filling a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

In re AARON D. WILLIAMS Case No. Chapter DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept..... \$900.00 Prior to the filing of this statement I have received..... \$900.00 \$0.00 Balance Due..... 2. The source of the compensation paid to me was: **☑** Debtor ☐ Other (specify) 3. The source of compensation to be paid to me is: ☐ Other (specify) 4. 🕅 I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. ☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

- 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

Bar No. 5736

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

01/19/2017 /s/ Sean P. Patterson, Esq.

Date Sean P. Patterson, Esq. Sean Patterson., Esq.

232 Court Street Reno, Nv. 89501

Phone: (775) 786-1615 / Fax: (775) 322-7288

/s/ AARON D. WILLIAMS

AARON D. WILLIAMS

01/19/2017 01:09:15pm

UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA RENO DIVISION

IN RE: AARON D. WILLIAMS CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

7	The above named Debtor	hereby verifies that	the attached list of	f creditors is true an	d correct to the best	of his/her
knowle	dge.					

Date	1/19/2017	Signature _	/s/ AARON D. WILLIAMS	
			AARON D. WILLIAMS	
Date		Signature _		

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Debtor(s): AARON D. WILLIAMS

Case No: Chapter: 7 0 10/1657/216/17QF1NESY.ASIAm RENO DIVISION

ANGELA WEBB P.O. BOX 52 COPPER CENTER, AK 99573

HEALOGICS SPECIALITY PHYS. SYNCB/WALMART P.O. BOX 14099 BELFAST, ME 04915

P.O. BOX 965024 ORLANDO, FL 32896

AT&T MONEY TREE T-MOBILE

P.O. BOX 5093 P.O. BOX 58363 P.O. BOX 53410

CAROL STREAM, IL 60197 SEATTLE, WA. 98138 BELLEVUE, WA 98015 AT&T

MONEY TREE

T-MOBILE

BARCLAYS BANK DELAWARE NORTHERN NEVADA EMERGENCY PHYS. TARGET NB
P.O. BOX 8803 P.O. BOX 95728 P.O. BOX 673
WILMINGTON, DE 19899 OKLAHOMA CITY, OK. 73143 MINNEAPOLIS, MN. 55440

CAPITAL ONE BANK
PROFESSIONAL FINANCE CO.
P.O. BOX 30281
SALT LAKE CITY, UT. 84130
PROFESSIONAL FINANCE CO.
STATE SUITE 100
SALT LAKE CITY, UT. 84130
SREELEY, CO. 80634
Verizon Wireless Bankruptcy Deposition of the state of th

CBNA CBNA P.O.BOX 6283

RC WILLEY P.O. BOX 65320 SIOUX FALLS, SD. 57117 SALT LAKE CITY, UT. 84165

COMENITY-EXPRESS RENOWN HEALTH
P.O. BOX 182789 P.O. BOX 30006
COLUMBUS, OH 43218 RENO, NV. 89520

RENO, NV. 89520

COMENITY-LANE BRYANT SOUTH RENO ATHLETIC CLUB
P.O. BOX 182789 9393 GATEWAY DR.
COLUMBUS, OH 43218 RENO, NV 89521

DEBTWAVE CREDIT

9325 SKY PARK CT #26

SAN DIEGO, CA 92123

SYNCB/CARE CREDIT

9.0. BOX 965036

ORLANDO, FL. 32896

ORLANDO, FL. 32896

FRONTIER FINANCIAL C.U. SYNCB/JC PENNEY
5200 NEIL RD. P.O. BOX 965007
RENO, NV. 89502 ORLANDO, FL 32896

GREATER NEVADA C.U. SYNCB/LOWES
451 EAGLE STATION LANE P.O. BOX 965005
CARSON CITY, NV. 89701 ORLANDO, FL 32896

Ħ	ill in	this in	formation to i	dentify your case	:		e box only as direct	
De	ebtor 1	1	AARON	D.	WILLIAMS	form and	in Form 122A-1Sup	p:
			First Name	Middle Name	Last Name	1. There is	no presumption of abuse	€.
	ebtor 2 pouse) First Name	Middle Name	Last Name	of abuse	ulation to determine if a papplies will be made und	der Chapter 7
Ur	nited S	States Ba	ankruptcy Court fo	r the: DISTRICT OF	NEVADA		est Calculation (Official F	
	ase nu knowi					of qualific	ns Test does not apply n ed military service but it o	could apply
						Check if t	his is an amended filing	
Of	ficia	l Forn	n 122A-1					
Ch	napt	er 7 S	Statement o	f Your Current	Monthly Income			12/15
info are mili 122	ormati exem itary s	on appli pted fro ervice, upp) with	ies. On the top o m a presumptior complete and file h this form.	f any additional pages of abuse because yo	heet to this form. Include s, write your name and ca ou do not have primarily c tion from Presumption of ncome	se number (if knowr onsumer debts or be	n). If you believe that you cause of qualifying	ou
1.	Wha	t is you	r marital and filin	g status? Check one o	only.			
	V	Not ma	rried. Fill out Colu	ımn A, lines 2-11.				
	_	Married	l and your spous	e is filing with you. F	ill out both Columns A and	B, lines 2-11.		
	_				ou. You and your spouse			
	_	☐ Liv	ring in the same l	nousehold and are no	t legally separated. Fill ou	t both Columns A and	d B, lines 2-11.	
		de	clare under penalt	y of perjury that you an	d. Fill out Column A, lines 2 d your spouse are legally s s that do not include evadir	eparated under nonba	ankruptcy law that applie	s or that you
	bank Augu in the	kruptcy ust 31. li e result.	case. 11 U.S.C. f the amount of yo Do not include ar	§ 101(10A). For exampur monthly income varing income amount more	ed from all sources, derivole, if you are filing on Septied during the 6 months, ace than once. For example, have nothing to report for a	ember 15, the 6-mont d the income for all 6 if both spouses own t	th period would be March months and divide the to he same rental property,	n 1 through otal by 6. Fill
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.		-	wages, salary, tip lyroll deductions).	s, bonuses, overtime	, and commissions	\$2,468.40		
3.		•	I maintenance pa s filled in.	yments. Do not includ	de payments from a spouse	\$0.00		
4.	regul your a spo	enses of lar contri depende	you or your dep ibutions from an u ents, parents, and	roommates. Include re		\$300.00		

Deb	otor 1 AARON D. WILLIAMS			c	ase number (if k	nown)	
					Column A Debtor 1	Column B Debtor 2 or non-filing spous	θ
5.	Net income from operating a busine	ess, profession, o	r farm				
		Debtor 1	Debtor 2				
	Gross receipts (before all	\$0.00					
	deductions)			-			
	Ordinary and necessary operating expenses	\$0.00		- Copy			
	Net monthly income from a business, profession, or farm	\$0.00		here →	\$0.00		
6.	Net income from rental and other re	eal property					
		Debtor 1	Debtor 2				
	Gross receipts (before all deductions)	\$0.00		-			
	Ordinary and necessary operating expenses	\$0.00	_	- Copy			
	Net monthly income from rental or other real property	\$0.00		here	\$0.00		
7.	Interest, dividends, and royalties				\$0.00		
8.	Unemployment compensation				\$0.00		
	Do not enter the amount if you conter benefit under the Social Security Act.						
	For you		\$0.	.00			
	For your spouse						
9.	Pension or retirement income. Do was a benefit under the Social Securi		ount received tha	t	\$0.00		
10.	Income from all other sources not I amount. Do not include any benefits or payments received as a victim of a or international or domestic terrorism. separate page and put the total below	received under the war crime, a crime If necessary, list o	Social Security A against humanity	Act y,			
	CASHED OUT 401k				\$948.84		
	FOOD STAMPS				\$100.00		
	Total amounts from separate pages,	•		+		+	
11.	Calculate your total current monthl Add lines 2 through 10 for each colun	y income. nn.			\$3,817.24	+	= \$3,817.24
	Then add the total for Column A to the		3.	L			Total current
							monthly income

Debtor 1		A	ARON D. WILLIAMS		Case number (if known)						
Р	art 2:		Determine Whether the Means	Test Applies to You							
12.	Calc	ulate	your current monthly income for the	year. Follow these steps:							
	12a.	Cop	py your total current monthly income fron	n line 11	Copy line 11 here 😝 12a. \$3,817.24						
		Mu	Itiply by 12 (the number of months in a ye	ear).	X 12						
	12b.	The	e result is your annual income for this pa	rt of the form.	12b. \$45,806.88						
13.	Calc	ulate	the median family income that applies								
	Fill in	the:	state in which you live.	Nevada							
	Fill in	the	number of people in your household.	2							
	Fill in the median family income for your state and size of household										
	To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.										
14.	How	ow do the lines compare?									
	14a.	a. Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3.									
	14b.	Line 12b is more than line 13. On the top of page 1, check box 2, <i>The presumption of abuse is determined by Form 122A-2</i> . Go to Part 3 and fill out Form 122A-2.									
Р	art 3:		Sign Below								
	Ву	signii	ng here, I declare under penalty of perju	ry that the information on this st	atement and in any attachments is true and correct.						
			ARON D. WILLIAMS ON D. WILLIAMS, Debtor 1	X Sign	ature of Debtor 2						
		Date	1/19/2017	Date	·						
			MM / DD / YYYY		MM / DD / YYYY						
	If y	ou ch	necked line 14a, do NOT fill out or file Fo	rm 122A-2.							

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Current Monthly Income Calculation Details

In re: AARON D. WILLIAMS

Case Number: 7

2. Gross wages, salary, tips, bonuses, overtime and commissions.

Debtor or Spouse's Income Description (if available)							
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month
Debtor GROSS INCOME FROM EMPLOYMENT-WALMART							
	\$2,739.44	\$2,881.84	\$1,493.28	\$3,374.77	\$1,723.89	\$0.00	\$2,035.54
Debtor GROSS INCOME FROM EMPLOYMENT-STARBUCKS							
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2.597.16	\$432.86

4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.

Debtor or Spouse's Income	Description (i	Description (if available)							
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month		
<u>Debtor</u>	RENT FROM \$300.00		\$300.00	\$300.00	\$300.00	\$300.00	\$300.00		

10. Income from all other sources not listed above.

Debtor or Spouse's Income	Description (if	Description (if available)							
	6 Months Ago	5 Months Ago	4 Months Ago	3 Months Ago	2 Months Ago	Last Month	Avg. Per Month		
Debtor	CASHED OU \$0.00	T 401k \$0.00	\$0.00	\$0.00	\$0.00	\$5,693.06	\$948.84		
<u>Debtor</u>	FOOD STAMPS \$0.00 \$0.00		\$300.00	\$300.00	\$0.00	\$0.00	\$100.00		